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# STATE OF HOMELESSNESS IN THE CITY OF BOSTON WINTER 1996-1997

*ANNUAL HOMELESS CENSUS REPORT  
DECEMBER 16, 1996*

**THOMAS M. MENINO, MAYOR**



**EMERGENCY SHELTER COMMISSION  
KELLEY A. CRONIN, EXECUTIVE DIRECTOR**



## EXECUTIVE SUMMARY

1. There were 2,835 men, 1,065 women, and 996 children counted during this year's census for a total of 4,896 compared to a total of 4,774 last year. The total number of homeless people in the City of Boston has increased 2.5%.
2. There were 183 men and women documented as sleeping on the street on the night of the census compared to 140 last year for a 30% increase.
3. Homeless adults overall accounted for 3,330 of the total. This was an increase of 3.6% over last year's overall homeless adult total. There were 1819 men and 323 women staying in adult shelters on the night of the census for a total of 2142. This number represents a decrease of 1.5% over last year's shelter total of 2176.
4. There were 179 women and children this year in battered women's shelters compared to 216 last year. This is a decrease of 17%.
5. Family members overall accounted for 1,523 of the total. This is consistent with last year's overall homeless family total. This year's total of 1,117 in shelters represents a 2.3% increase over last year's shelter total of 1,091. There were 33 fathers, 339 mothers, and 745 children counted in family shelters and scattered site shelter programs. This number includes 16 fathers, 44 mothers, and 192 children from Boston who were placed in shelters throughout the Commonwealth as far away as Springfield. The City of Boston's Emergency Shelter Commission continues to see families denied access to shelter by the State's Department of Transitional Assistance.
6. Adolescents accounted for 43 of the total. This number has remained constant from last year.



# **THIS YEAR'S CENSUS METHODOLOGY**

## **THE HOMELESS LIVING IN SHELTER**

Approximately one month prior to the actual census, Boston's Emergency Shelter Commission mailed an advisory to all of the city's shelter providers and transitional programs to inform them of the study. Shelter contacts were informed which day the census was to be taken and how the survey would be conducted; the Shelter Commission also requested volunteers for the street count. The programs were asked to tabulate the population of the shelter on the night of the count. The City's Emergency Shelter Commission then telephoned each shelter on December 17th to obtain the total from the previous night.

## **THE HOMELESS LIVING ON THE STREET**

The City was divided into thirty-eight separate entities for the purpose of the census. The downtown areas were created so that they are small enough to be thoroughly covered by volunteers on foot; outlying neighborhoods where there have been few homeless people identified in the past were covered by car. Even in these neighborhoods, volunteers were expected to leave their vehicles and conduct the census by foot in areas which had a higher likelihood of homeless individuals. Volunteers were provided with a list of locations in their area where homeless individuals were known to be. This list was assembled from a questionnaire that was distributed in advance to a variety of neighborhood representatives and individuals who work with the homeless. These people provided the City with crucial information to identify specific areas where homeless people have been known to frequent.

All teams received walkie-talkies to facilitate communication during the census. This was required to guarantee the volunteers' safety and to call for emergency medical assistance if needed for individuals encountered on the street. Volunteers also used two vans accessed by walkie-talkie to transport homeless individuals who requested assistance in getting to a shelter.

## THE VOLUNTEERS

Volunteers were recruited from the various shelters throughout the City, the clergy, neighborhood residents, City employees, and City Year volunteers. This was an important element of the process, because people who work with this population can assist in avoiding stereotypes which are often associated with homelessness. The study started at 11 p.m. in order to ensure that businesses or other places of temporary refuge are closed. Also, the study was conducted on a Monday night/Tuesday morning when there is less general pedestrian traffic.

This census count has been conducted annually during the second or third week of December, when the weather is cold enough to identify the population that is exposed to the elements and readily in need of temporary shelter. During this year's census, the temperature was in the '40s with a light rain all night.

Volunteers were asked to designate people by the following identifiable factors:

1. Was the individual definitely or possibly homeless ?  
People who have a place to go often appear not to. If it was unclear in specific situations, volunteers were asked to record these individuals as "possible." The city included people listed as "possible" in the count presented in this document.
2. Was the individual in need of medical attention ?  
The census volunteers included many medical professionals from Boston's Health Care for the Homeless. As well, Boston City Hospital provides service to indigent patients.
3. Did the individual need transportation to shelter ?  
While Pine Street Inn operates an outreach van every night, some individuals may be unaware of these services or may be unable to find a ride to shelter. The Census used two vans provided by Long Island Shelter to transport.

Volunteers were requested not to ask individuals anything other than the questions raised above in order to respect each homeless person's right to privacy. Since the outdoor homeless population is served by several different outreach programs, our expressed purpose was simply to determine the size of the homeless population in Boston.



## **HISTORY**

The census of Boston's homeless population is conducted annually by the City's Emergency Shelter Commission. The 1983 study, conducted by six volunteers working over a period of two weeks, was the City's first attempt to identify the size of the street population associated with homelessness. This beginning work on counting the homeless inspired later projects which provided a clearer picture of the scope of the homeless population in the City of Boston. The study has grown to include dozens of non-profit service organizations, over two hundred volunteers, and appropriate City agencies as directed by Mayor Menino.

## **PURPOSE**

Government agencies are not adequately prepared to address important service delivery issues until the scope and nature of the problem can be defined. Prior to conducting the first census count of the homeless in 1983, some estimates of the number of homeless in Boston varied by as much as ten thousand people. With accurate numbers, the City can coordinate the services, including shelter, street outreach, food, clothing, medical, employment training, substance abuse treatment, and mental health treatment, that not only enable homeless people to survive but to help them move beyond shelter to more independent and productive lives.

**The annual homeless census informs the Mayor as to gaps in the continuum of care and what resources the City will need in order to meet that commitment. The City of Boston uses census results to shape and coordinate applications for funding. This year the City of Boston was awarded \$13.6 million from the federal government for programs designed to move people beyond shelter. Under the leadership of Mayor Menino, the City of Boston continues its commitment that no individual will go without a bed, without a meal, without medical care, without opportunity and hope simply because they are homeless.**

# THE POPULATION OF THE STREET

## THE POPULATION OF THE STREET

Winter 1996-96

Winter 1996-97

	Male	Female	Children	Male	Female	Children
Street Count	101	39	0	163	20	0
<b>TOTALS</b>	<b>140</b>			<b>183</b>		

There were 163 men and 20 women on the streets of Boston on the night of the census, which is a 30% increase over last year's number. Many of those found on the streets this year accepted rides into shelter. Fortunately again, there were no young children identified in the street count although the count includes a number of older adolescents.

Many homeless men and women who sleep on the streets are mentally ill. Some mental illnesses, especially schizophrenia, cause the person to experience auditory hallucinations and acute paranoia. Their condition has often deteriorated to the point where they are too paranoid to go into already overcrowded shelters and afraid of the people who offer them help in the street. Clearly, these people are in need of specialized services, including street outreach, appropriate shelter, and in-patient services if necessary.

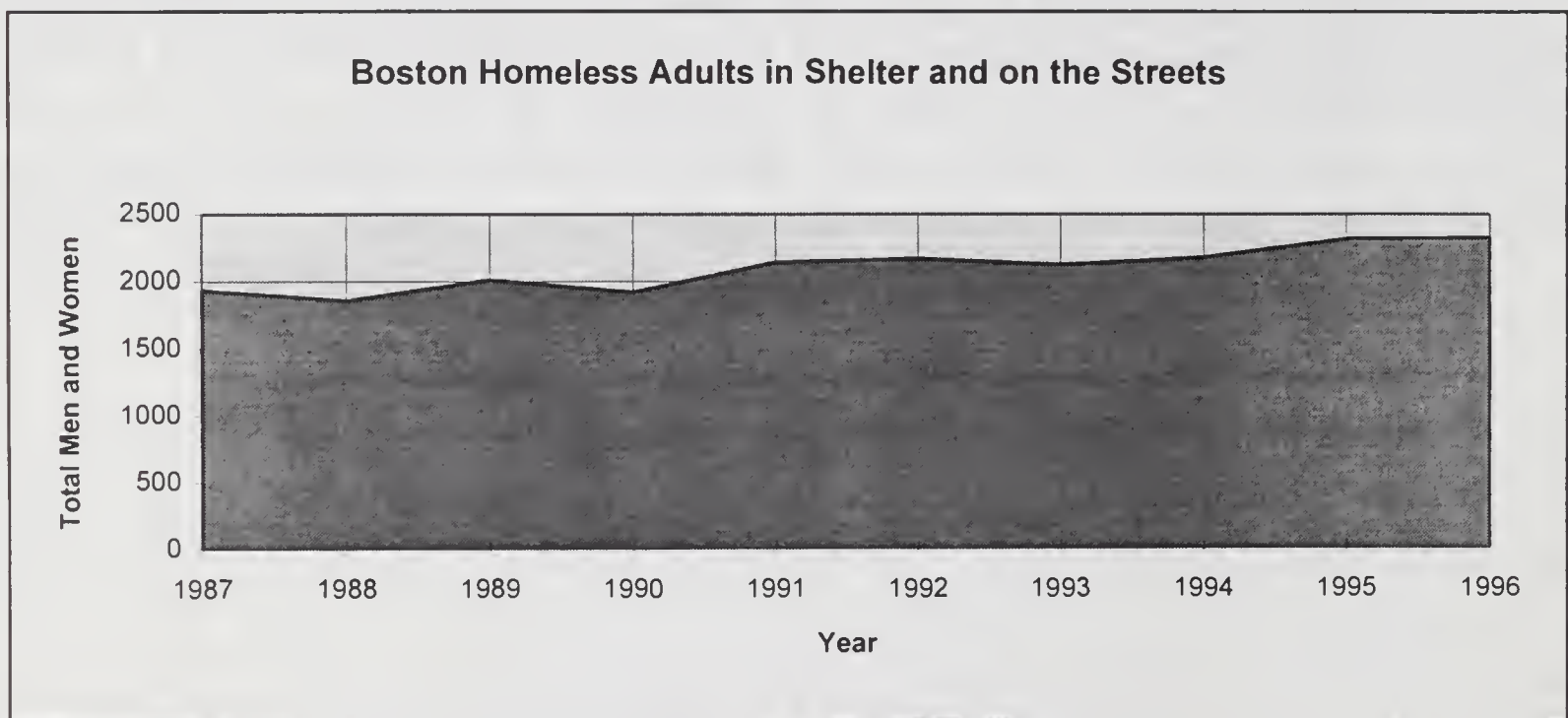
Pine Street Inn has operated an outreach van for the last 10 years which goes out each night from 9 p.m. - 5 a.m. attending to this hard-core population. Recently daytime outreach programs in Boston's downtown neighborhoods have been added to work with this hard-to-serve group. Tri-City Mental Health is working with the mentally ill, Shattuck Shelter is working with substance abusers, and the Pine Street Inn is expanding its daytime outreach in Downtown Crossing to cover additional neighborhoods.



# HOMELESS ADULTS IN SHELTER

## ADULT SHELTERS

	Winter 1995-96		Winter 1996-97	
	Male	Female	Male	Female
Betty's Place		15		14
Health Care for Homeless	43	5	45	3
Kingston House	40	4	47	8
New England Vets Shelter	137		143	
Pine Street Inn	345		345	
Anchor Inn	173		197	
Women's Inn		106		113
St. Paul's	53		55	
Night Center	59	19	55	17
Long Island Shelter	416	50	374	55
Woods-Mullen	150	60	123	58
LIS Annex	103		103	
Rosie's Place		20		20
Sancta Maria		10		10
Shattuck Shelter	190	21	170	17
United Homes	86	8	97	8
YMCA - Cardinal Medeiros	63		65	
<b>SUB-TOTALS:</b>	<b>1858</b>	<b>318</b>	<b>1819</b>	<b>323</b>
<b>TOTALS</b>	<b>2176</b>		<b>2142</b>	





# HOMELESS ADULTS IN SHELTER

There were 1,819 men and 323 women in adult shelters on the night of the census - for a total of 2,142 which is 1.5% decrease from the number counted in adult shelters last year. Although a slight decrease is positive news, there are still more single adults in the shelter system than two years ago and shelters are still at capacity overall. Many nights of each month shelters are over capacity. Shelters are transitioning people into the mainstream, but the fact remains that newly homeless people are moving these shelter beds as they become available.

The City credits the McKinney Homeless Assistance grants received from the Department of Housing and Urban Development for the transitional movement out of shelters. An investment of federal resources, not federal mandates, is a major part of the solution to the problems of our country's homeless. HUD has recognized the strength of the collaboration between the City and homeless providers and, consequently, Boston has been able to leverage significant resources from the federal government to create new homeless programs to complement the existing shelter system.

These numbers demonstrate that with appropriate resources homeless people can move beyond shelter. In the past two years, thousands of individuals have used the safety net of emergency shelter, received the assistance they needed, and moved along the continuum of care and into permanent housing.

However, the shelter system is often the safety net for the failures of other systems in our society. For every person who has been successfully placed in housing, a newly homeless person has taken their place. We need to be looking at the reasons why homelessness is continuing to be a factor for so many in our society.

The City of Boston's Long Island Shelter reported 713 guests, which is 33% of the adult shelter population. The Pine Street Inn's 782 guests make up 36.5% of those counted in adult shelters.

The City of Boston and shelter providers are making every effort to convert shelter beds to transitional beds. This effort is to help move people beyond shelter and into housing and jobs. Transitional programs comprise 39% of Pine Street Inn's beds, 30% of Long Island's beds, and 20% of Shattuck's shelter beds.



# HOMELESS FAMILIES IN SHELTER

## FAMILY SHELTERS

Winter 1995-96

Winter 1996-97

	Male	Female	Children	Male	Female	Children
Boston Family		8	9		7	14
Casa Nueva Vida		6	14		6	12
Crittenton-Hastings		14	17		15	17
Crossroads	2	11	30	1	9	23
Families-In-Trans	2	22	48		22	48
Family House		16	29		17	22
LifeHouse		10	12	1	11	6
Margaret's House		26	22		25	45
Project Hope		7	7		4	8
Queens of Peace		4	3		7	4
Salvation Army		3	4		3	4
Sojourner House	1	5	13	2	6	9
St. Ambrose Inn		11	26	1	11	19
St. Mary's Home		26	12		19	13
Traveler's Aid					1	1
New Chardon Street		15	22		12	19
<b>SUB-TOTALS:</b>	<b>5</b>	<b>184</b>	<b>268</b>	<b>5</b>	<b>175</b>	<b>264</b>

## OTHER

Winter 1995-96

Winter 1996-97

	Male	Female	Children	Male	Female	Children
Families in shelters outside Boston *	2	24	56	16	44	192
Scattered Site Shelter	14	166	372	12	120	289
<b>SUB-TOTALS:</b>	<b>16</b>	<b>190</b>	<b>428</b>	<b>28</b>	<b>164</b>	<b>481</b>

## TOTAL HOMELESS FAMILIES IN BOSTON

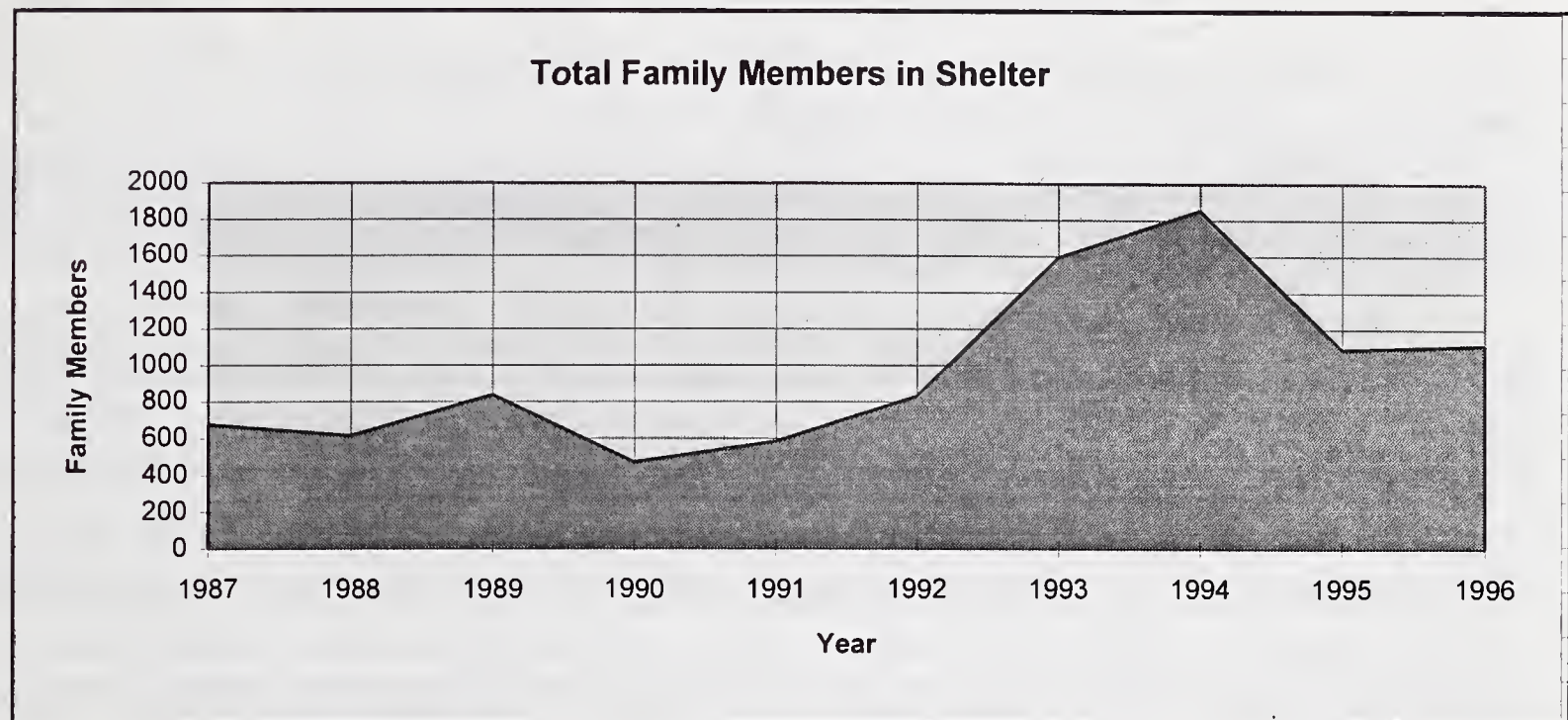
Winter 1995-96

Winter 1996-97

	Male	Female	Children	Male	Female	Children
	<b>21</b>	<b>374</b>	<b>696</b>	<b>33</b>	<b>339</b>	<b>745</b>
<b>TOTALS</b>		<b>1091</b>			<b>1117</b>	



# HOMELESS FAMILIES IN SHELTER



Shelters for families are mostly funded by the State's Department of Transitional Assistance (formerly the Department of Public Welfare). This year's 33 men, 339 women, and 745 children staying in family shelters and scattered site shelter programs (where families are temporarily placed in an apartment rather than a congregate or communal shelter ) represent an increase of 2.3% over last year's figures.

The City of Boston continues to see many families, particularly poor working families, denied access to shelter as a result of restrictive State shelter screening regulations. The income standards which determine eligibility for shelter are particularly problematic and out of touch with reality. According to these guidelines, a family of three (for instance, a mother and two children) is ineligible for shelter if their gross income is over \$997 per month (or \$6.23 per hour for a 40 hour work week). The State bases this policy on the belief that a family of three making over this \$997 amount should be able to afford housing; however, the current real estate market in the Greater Boston area dictates that this family will be spending over 60% of their income for a cheap one-bedroom apartment, and they still have to pay for utilities, food, and day care. These working poor families are falling through the cracks in the safety net: they are too poor to afford decent housing and too "rich" (according to the State's guidelines) to be eligible for temporary shelter.



The causes of family homelessness are rooted in poverty, and denying a family emergency shelter only exacerbates their problems forcing them either to live in overcrowded conditions with reluctant relatives or friends, or split the family up with different children staying with different relatives. The emergency shelter system provided by the DTA (formerly the Department of Public Welfare) provides a safety net and hopefully a foundation for future independence for homeless families in Massachusetts. With that safety net in tatters, the State is jeopardizing the lives and futures of hundreds of Massachusetts children.

Shelter stays continue to increase in length, due to a lack of affordable housing and a lack of adequate income supports for families, particularly families headed by single mothers. Family stays in shelter are averaging as high as 10 months in some shelters and many families report being forced out of shelter into expensive housing that they clearly will not be able to afford in the long-run. Housing search workers under contract with the State report that, because of lack of affordable housing in the Boston area, homeless families have been directed as far away as Fall River and New Bedford in search of affordable market-rate housing.

In terms of subsidized housing, the effects of Federal and State cutbacks for affordable housing are beginning to be felt. The Massachusetts Rental Voucher Program (MRVP, formerly the 707 program), managed by the Commonwealth's Department of Communities and Development, does not roll over certificates. This means that once a family has increased its income and no longer needs that subsidy, that subsidy is not made available to another family in need. Because of the overall lack of affordable units, the City strongly encourages the State to create an affordable housing strategy for families who are homeless and at-risk of homelessness.

In conjunction with the lack of affordable housing, lack of income (based on several factors including a mismatch of job skills with available jobs, low AFDC payments, lack of day care slots, lack of quality education, and the lack of paternal financial support) causes homelessness for families. Combined with cutbacks in food assistance programs, "welfare reform" will impact many homeless families in a negative way by taking away a source of income that really helped these families get over hard times. As families are cut off from benefits, they will need jobs and job training to survive. The innovative Transition to Work Collaborative, funded by the City with Federal McKinney money, will work with homeless families to increase their education, income, and self-sufficiency as they move from the shelter to permanent housing.



# WOMEN IN CRISIS

## WOMEN IN CRISIS PROGRAMS

	Winter 1995-96		Winter 1996-97	
	Female	Children	Female	Children
Asian Shelter Advocacy Project	3	9	5	9
Casa Myrna Vazquez	30	45	30	38
Dove, Inc.	8	11	5	8
Elizabeth Stone House	27	38	24	29
FINEX	5	11	7	9
Harbor Me	1	1	0	0
Renewal House	4	7	4	3
Transition House	7	9	4	4
<b>SUB-TOTALS:</b>	<b>85</b>	<b>131</b>	<b>79</b>	<b>100</b>
<b>TOTALS</b>	<b>216</b>		<b>179</b>	

The number of women and children in domestic violence shelters decreased by 17%. There were 79 women and 100 children in shelter on the night of the census, compared to 85 women and 131 children last year. Please note however that most of this decrease is in the number of children, meaning that the average family size decreased. The number of family units or single women in shelter only dropped from 85 to 79, or 7%. Advocates report that requests for emergency shelter still exceed the supply.

The domestic violence shelters and the family shelters are operated as separate systems. Because the State imposes a 90 day limit on the amount of time a woman can stay at a battered women's shelter, these women often have to leave these programs before they have secured housing. Consequently, many of these women enter the emergency shelter programs for homeless families.

It would be less disruptive to battered women and their children if they could receive shelter in one location, and not have to bounce between the systems until they secure housing.

In the fall of 1994, Mayor Menino gave higher priority to battered women for Section 8 and public housing in an effort to decrease the amount of time these families have to stay in shelter.



# ADOLESCENT PROGRAMS

	Winter 1995-96			Winter 1996-97		
	Male	Female	Children	Male	Female	Children
Bridge Transitional Living Extension	6	8		6	4	2
Bridge-Elliot Complex		16	9	8	7	5
Bridge "Runaway Housing"	0					2
YouthBuild	2			9		
<b>SUB-TOTALS:</b>	<b>9</b>	<b>24</b>	<b>9</b>	<b>23</b>	<b>11</b>	<b>9</b>
<b>TOTALS</b>	<b>42</b>			<b>43</b>		

There were 23 young males between the ages of 18 and 25, 11 young females between the ages of 18 and 25, and 9 children under 18 yrs of age in the adolescent programs this year, compared to 9 males, 24 females and 9 children last year.

These programs are essentially operating near capacity. The adult shelters such as Pine Street, Long Island, and Shattuck have reported an increase in the number of young people over 18 yrs. of age using their programs; these programs do not offer services to anyone younger than 18 years based on the belief that the adolescent group has specialized needs that can best be addressed elsewhere.

Bridge Over Troubled Waters, funded by Federal McKinney money, will be opening a transitional day program for homeless youth and young adults living on the streets or in the adult emergency shelters.



# HOSPITAL EMERGENCY ROOMS

## HOSPITAL EMERGENCY ROOMS

	Winter 1995-96		Winter 1996-97	
	Male	Female	Male	Female
Boston Medical Center (formerly Boston City Hospital)	2	0	0	0
Carney Hospital			1	
Massachusetts General	2	0	3	2
New Eng. Medical Center	0	0	1	0
University Hospital	0	1	N.A.	N.A.
<b>SUB-TOTALS:</b>	<b>4</b>	<b>1</b>	<b>5</b>	<b>2</b>
<b>TOTALS</b>	<b>5</b>		<b>7</b>	

This count identifies the size of the homeless population seeking medical treatment in hospital emergency rooms on the evening of the count.

Please see the Appendix for information about the homeless inpatient population.

## DETOX

	Winter 1995-96		Winter 1996-97	
	Male	Female	Male	Female
Andrew House	22	4	20	5
Boston Alcohol	10	5	38	15
Dimock Detox	10	5	20	10
Marathon Detox	N.A.	N.A.	28	3
River Street	10	5	16	6
STAIR	37	11	10	4
Tewksbury	98		115	
<b>SUB-TOTALS:</b>	<b>187</b>	<b>30</b>	<b>247</b>	<b>43</b>
<b>TOTALS</b>	<b>217</b>		<b>290</b>	

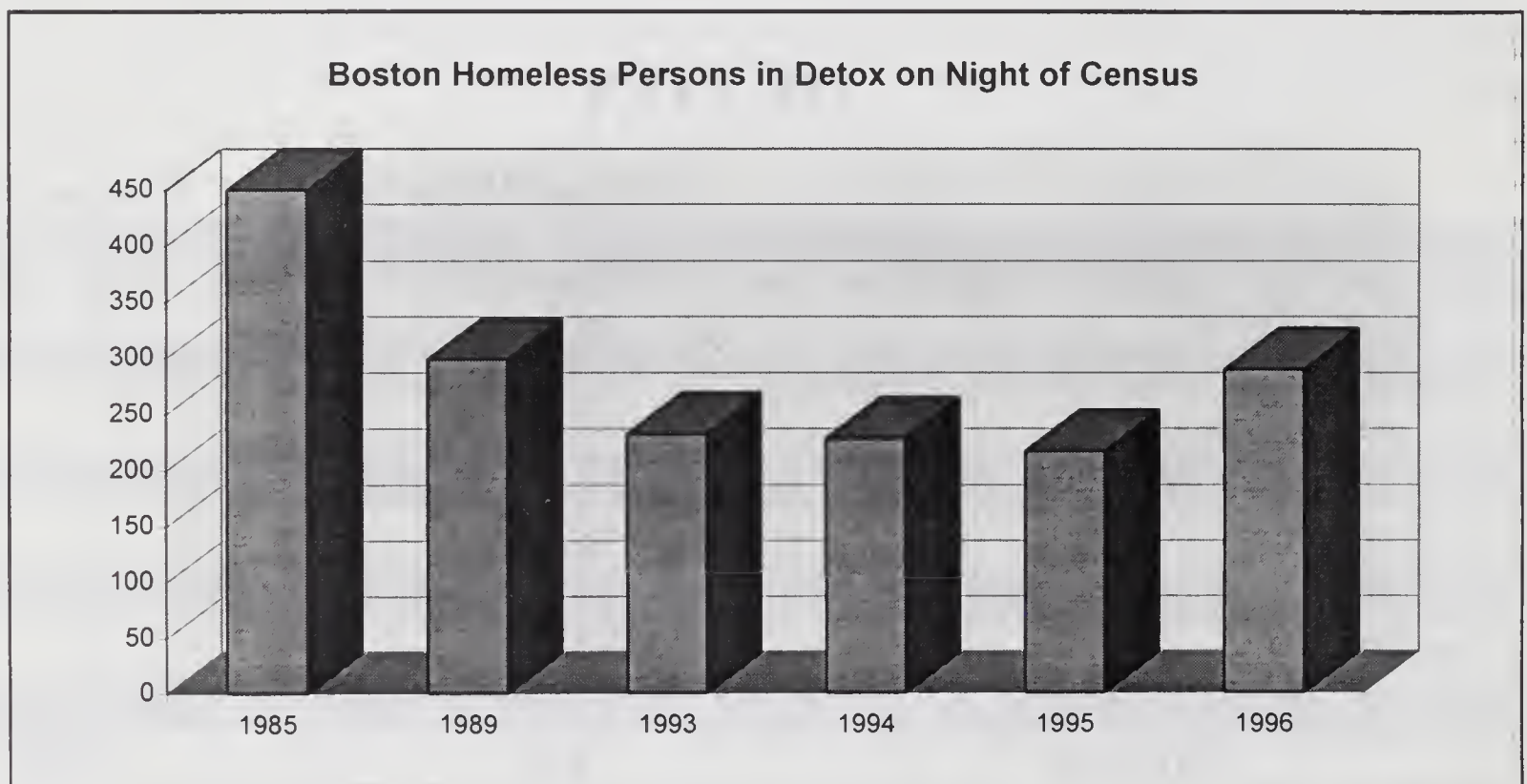


# DETOX

On the night of the census, there were 247 homeless men and 43 homeless women in detox facilities - a total of 290. Other than the Nichols Program at Tewksbury State Hospital, this total does not include any Boston homeless persons who may be in a detox outside the city.

Since the demand for substance abuse services for the homeless population far exceeds the supply, homeless providers have been advocating for several years that the State increase the supply of detox and recovery beds for homeless individuals. The City would like to commend the State Legislature and the Commonwealth's Department of Public Health for efforts to provide 60 additional detox beds specifically targeted to homeless individuals as well as 60 additional recovery beds. As evidenced by the 33.6% increase in the number of homeless individuals accessing detox services, these new resources are reaching this population and are creating a way out of homelessness for those grappling with alcohol and other drugs.

Please see the Appendix for figures on recovery home usage by homeless persons.





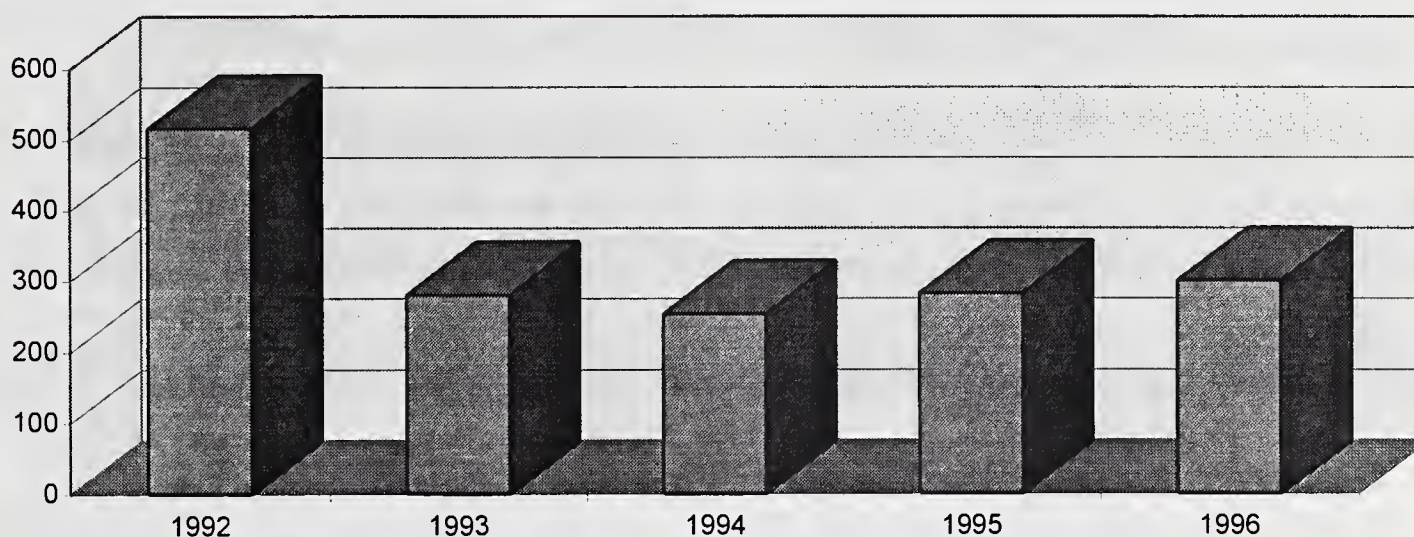
# MENTAL HEALTH FACILITIES

## MENTAL HEALTH FACILITIES

	Winter 1995-96		Winter 1996-97	
	Male	Female	Male	Female
Mass. Mental Health				
Fenwood Inn	21	23	26	21
Deaconess	7	0	0	0
Lindemann Center	12	6	14	7
Solomon Carter Fuller	9	1	14	6
Bay Cove M.H.	99	18	89	21
Bay View Inn	26	7	34	2
Parker Street Central	23	12	29	16
Parker Street West		19		19
St. Alphonsus Respite			2	1
<b>SUB-TOTALS:</b>	<b>197</b>	<b>86</b>	<b>208</b>	<b>93</b>
<b>TOTALS</b>	<b>283</b>		<b>301</b>	

This year, there were 208 men and 93 women, a total of 301 homeless individuals, in Department of Mental Health shelters.

**Boston Homeless Persons in DMH Programs on Night of Census**





# MENTAL HEALTH FACILITIES

The State has recognized that mental illness is a significant factor for a large percentage of the homeless population. Appropriately, the State has committed resources over the past few years to create housing units for the homeless mentally ill. The City commends the State for this commitment and encourages the State to continue providing housing for this population. The City also recommends that the State recognize the need to provide housing and service options to the homeless mentally ill throughout the Commonwealth, and not just in the City of Boston.

The State needs to provide a continuum-of-care for the homeless mentally ill. Homeless shelters are not equipped to deliver the mental health services homeless mentally ill men and women need. DMH needs to improve access to their specialized shelters in order to move homeless men and women along the continuum and into permanent housing.

Both the City and the State have come to recognize the specific needs of the dually diagnosed population. These are people who have both substance abuse and mental health issues. Traditionally, a split between the substance abuse and mental health service systems would result in these clients receiving uncoordinated treatment. For example, a schizophrenic man who abused alcohol in an attempt to drown out the voices in his head might receive treatment in detox for his drinking. But after completing detox with his mental illness untreated, the symptoms of schizophrenia would still be there and he would be tempted to return to drinking in an attempt to self-medicate.

More recently, providers have advocated for the close coordination of mental health and substance abuse services for this population. Bay Cove Human Services' Project ACCESS, in collaboration with the Shattuck Shelter and the Vietnam Veterans Workshop and funded by Federal McKinney money, will focus on dually diagnosed homeless men and women and their special needs.



# TRANSITIONAL SHELTERS

## TRANSITIONAL SHELTERS

Winter 1995-96

Winter 1996-97

	Male	Female	Children	Male	Female	Children
Brookview House		8	17		8	27
Casa Esperanza	23	7		25	10	6
Crittenton-Hastings						
Transitional		15	30		15	19
T.R.A.C.		2	2		18	16
Dennis McGlaughlin House		N.A.	N.A.		10	22
Elders Living At Home	12	5		9	5	
Empowering Young Mothers		6	6		2	2
Harbor Lights	60	26		52	29	
Horizons House		4	5		3	3
Mass. Halfway Houses	94	14	36	114	14	12
Nazareth House		7	10		2	3
New England Vets						
Transitional	117			113		
One Wise Street	8			8		
Revision House		8	11		11	13
Seton Manor	13	4		16	3	
Women, Inc.		24	10		21	12
Portis House		7	13		4	7
<b>SUB-TOTALS:</b>	<b>327</b>	<b>137</b>	<b>140</b>	<b>337</b>	<b>155</b>	<b>142</b>
<b>TOTALS</b>	<b>604</b>			<b>634</b>		

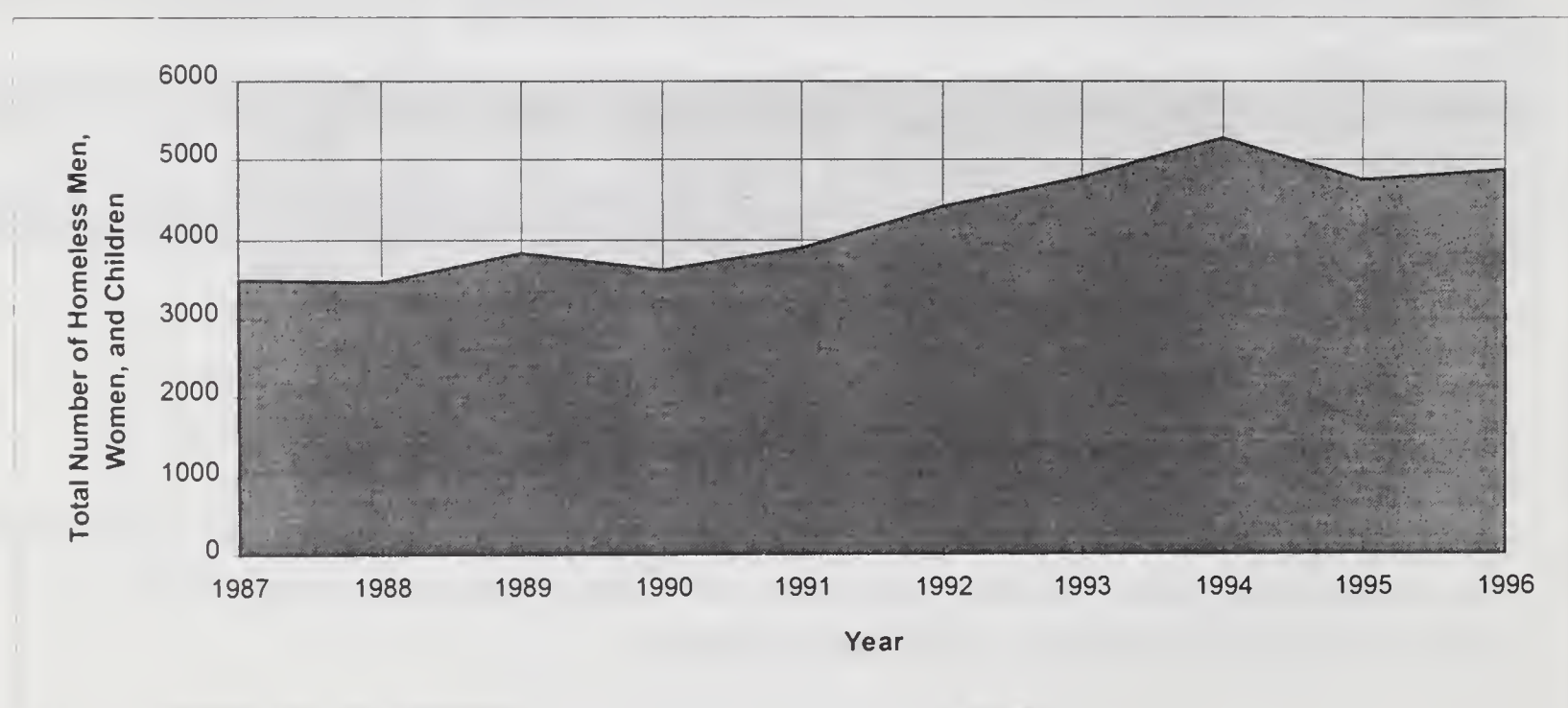
The number of homeless people in transitional programs increased by 5% from 1995 to 1996. There were 634 homeless men, women and children in transitional shelters and programs this year, compared to 604 last year. This increase was due to the opening of the Dennis McGlaughlin House in Charlestown for mothers and their children, funded by the City's successful application for money through the Federal McKinney program.



# TOTALS

	Winter 1995-96			Winter 1996-97		
	Male	Female	Children	Male	Female	Children
Street Count	101	39		163	20	
Adult Shelters	1858	318		1819	323	
Family Shelters	5	184	268	5	175	264
Other	16	190	428	28	164	481
Women In Crisis		85	131		79	100
Adolescent	9	24	9	23	11	9
Hospital ERs	4	1		5	2	
Detox	187	30		247	43	
Mental Health	197	86		208	93	
Transitional Shelters	327	137	140	337	155	142
<b>TOTALS</b>	<b>2704</b>	<b>1094</b>	<b>976</b>	<b>2835</b>	<b>1065</b>	<b>996</b>
<b>GRAND TOTALS</b>	<b>4774</b>			<b>4896</b>		

The overall homeless population has increased by 2.5% this year. Working with the State and Federal governments and homeless service providers, Mayor Menino is committed that the City of Boston will continue to help homeless families and individuals move into job training, educational training, and permanent housing beyond shelter.





# APPENDIX

In next year's census, the City will also add data from hospital inpatient lists. This year hospitals within Boston reported that 52 homeless men, women and children were included on their inpatient census on the night of December 16th.

Likewise in next year's census, we will be adding data from recovery homes for people in substance abuse treatment. This year there were 301 homeless men and women in these programs on the night of the census.

In the past these institutions have not been included in the census report. To present data consistent with previous years' collection methods, we have not added them into the totals. Next year we will include these numbers in an effort to better document the scope of homelessness.



# **ACKNOWLEDGMENTS**

**We would like to thank the following folks for their help with this year's census:**

**Mayor's Office**

**Office Of Neighborhood Services**

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**Inspectional Services Department**

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**and**

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**This report was produced by :**

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